	03-16-08	PART I	B - FEE(S)	TRANSMITTAL		\mathcal{A}			
Complete and send this form, together want pplicable fee(s), to: Mail or Fax				Mail Stop ISS Commissioner to P.O. Box 1450 Alexandria, Virg	Mail Stop ISS FEE Commissioner for Patents				
maintenance fee notification	ns.	21001. 1, 0, (UE FEE and Porders and notification of the second representation of the se	UBLICATION FEE (if requirements of maintenance fees where the correspondence address;	ired). Blocks 1 through 5 s vill be mailed to the current and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for			
LAHIVE & COC 28 STATE STREE BOSTON, MA 02 03/17/2006 HDEMESS2 0	ET 109	OTP MAR 1	E 4978	ree(s) Transmittal. The papers. Each additional have its own certificate. Certificate of the certify that the States Postal Service waddressed to the Mai	is certificate cannot be used all paper, such as an assignme of mailing or transmission. rtificate of Mailing or Transis Fee(s) Transmittal is being	smission Ig deposited with the United Its class mail in an envelope It above for being facsimile			
02 FC:1504 300	.00 DA .00 DA	THAT I	DEMO			(Signature) (Date)			
APPLICATION NO.	FILING DATE		FIRST NAMED	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.			
10/635,872	08/05/2003	Di	iarmaid H. Doug		HTS-035DV	9066			
			· -	SOTHERMAL CONTOURS I	PRODUCED BY A LASER				
APPLN. TYPE	SMALL ENTITY	ISSUE F		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	YES	\$700) 	\$300	\$1000	04/12/2006			
EXAM	IINER	ART UN	TIV	CLASS-SUBCLASS	CLASS-SUBCLASS				
VANNUC	CI, JAMES	2828	828 372-100000						
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					& Cockfield, LLP V. Smurzynski,Esq.				
(A) NAME OF ASSIGN	an assignee is identified be 37 CFR 3.11. Completion of	low, no assignee of this form is NO	data will appea T a substitute fo B) RESIDENCE	ar on the patent. If an assignment or filing an assignment.		ocument has been filed for			
	orne BioScience	_		rly, MA					
4a. The following fec(s) are	enclosed:		o. Payment of Fo	ent): Individual Co	rporation or other private gro	oup entity U Government			
Issue Fee □ A				A check in the amount of the fee(s) is enclosed.					
Publication Fee (No small entity discount permitted) Advance Order - # of Copies 10			Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of Copies 10 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 12-0080 (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above)					credit any overpayment, to opy of this form).				
	MALL ENTITY status. See 3		☐ b. Applicar	nt is no longer claiming SMAL	L ENTITY status. See 37 C	FR 1 27(a)(2)			
The Director of the USPTO in NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issuablication Fee (if required) words of the United States Pater	e Fee and Publica ill not be accepted at and Trademark	tion Fee (if any)	or to re-apply any previously other than the applicant; a regis	paid issue fee to the applica stered attorney or agent; or th	tion identified above. ne assignee or other party in			
Authorized Signature Kunn M. H.				Date March 15, 2006					
Typed or printed name Jeanne M. DiGlorgio Registration No. 41,710									
this form and/or suggestions Box 1450, Alexandria, Virgi Alexandria, Virginia 22313-1	for reducing this burden, sho nia 22313-1450. DO NOT S 1450.	ould be sent to the END FEES OR C	Chief Informa COMPLETED F	obtain or retain a benefit by the ction is estimated to take 12 mm the individual case. Any contion Officer, U.S. Patent and FORMS TO THIS ADDRESS ection of information unless it determined	Trademark Office, U.S. Department of the Send TO: Commissioner	ne you require to complete utment of Commerce, P.O. for Patents, P.O. Box 1450,			

10/635,872 - Conf. # 9066

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE er the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Filing Date

Application Number

TRANSMITTAL **FORM**

(to be used for all correspondence after initial filing)

August 5, 2003 First Named Inventor DOUGLAS-HAMILTON Art Unit 2828 Examiner Name **VANNUCCI**

Attorney Docket Number HTS-035DV Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)							
x Fee Transmittal Form		Drawing(s)		After Allowance Communication to TC			
Fee /	Attached	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences			
Amendment/Reply		Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
After Final		Petition to Convert to a Provisional Application		Proprietary Information			
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence		Status Letter Other Enclosure(s) (please Identify below): PTOL-85 Return Receipt Postcard			
Extension of Time Request		Terminal Disclaimer					
Express Abandonment Request		Request for Refund					
Information Disclosure Statement		CD, Number of CD(s)					
Certified Copy of Priority Document(s)		Landscape Table on CD					
Reply to Missing Parts/ Incomplete Application		Remarks					
Reply to Missing Parts under 37 CFR 1.52 or 1.53							
	SIGNAT	URE OF APPLICANT, ATTOR	RNEY, OR	AGENT			
LAHIVE & COCKFIELD, LLP							
Signature A.A. Signature							
Printed name	rinted name Jeanne M. DiGiorgio						
Date	March 15, 2006		Reg. No.	41,710			

PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Onder the Paperwork Reducti	OH MOL OF TO	oo, no person ere re	quired to	respond to a consecto		plete if Know		CONTOCHEMBER
Effective Fees pursuant to the Consolidate	on 12/08/20 d Appropria		2. 4818).	Application Nun		10/635,872 - C		<u>-</u>
FEE TRANSMITTAL			Filing Date		August 5, 2003			
			First Named Inv	<u> </u>	DOUGLAS-HAMILTON			
For FY 2005			Examiner Name VANNUCCI					
X Applicant claims small entity status. See 37 CFR 1.27			Art Unit 2828					
TOTAL AMOUNT OF PAYMENT (\$) 1,030.00			Attorney Docket No. HTS-035DV					
METHOD OF PAYMENT	(check al	that apply)					<u></u>	
Check Credit Ca								
X Deposit Account Deposi	t Account Nur	mber: 12-0080 D	eposit Acc	count Name:	Lah	ive & Cockfield	d, LLP	
For the above-identif	ied deposi	t account, the Di	rector is	s hereby authorize	ed to: (chec	k all that apply)		
x Charge fee(s) i	ndicated b	elow		Charge	e fee(s) ind	icated below, ex	cept for th	ne filing fee
Charge any add fee(s) under 37	ditional fee 7 CFR 1.10	e(s) or underpayr 6 and 1.17	nent of	x Credit	any overpa	yments		
FEE CALCULATION								
1. BASIC FILING, SEARCH,	AND EXA	MINATION FEE	S					
	FILI	NG FEES	SE	ARCH FEES	EXAMIN	ATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES						•		Small Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (including	· .	•					50	25
Each independent claim over	r 3 (includ	ing Reissues)					200	100
Multiple dependent claims							360	180
Total Claims Extra C	<u>laims</u>	Fee (\$)	Fee	Paid (\$)	Mu	Itiple Depende		
- 20 =	×	=			<u>Fee</u>	<u> </u>	ee Paid (\$)
Indep. Claims Extra C		Fee (\$)	Fee I	Paid (\$)	•			_
-3=	× .	=						
3. APPLICATION SIZE FEE	vinaa ava	and 100 abouts a	fmaman	(avaludina alaatm	aniaallu El	ad aaawamaa aa		
If the specification and draw listings under 37 CFR 1.	_			`	•	•	•)
sheets or fraction thereo		• •		,		, 101 04011 40		,
<u>Total Sheets</u> <u>Ext</u>	ra Sheets	Number o	f each a	dditional 50 or frac				Paid (\$)
4. OTHER FEE(S)				(voorio up to 2 mile			Fees	 Paid (\$)
Other (e.g., late filing sur	ciiui goj.	1501 Utility issu	_					0.00
				or early, volunta patent w/o color	•	ııldı		0.00).00
COURTED DY			- F J VI					
SUBMITTED BY	,7 \$,		Registration No.	44.740	Tolore.	/047\ 003	7 7400
Signature Curu	1	15×20		(Attorney/Agent)	41,710	Telephone	(617) 22	<i>(-1</i> 400
Name (Print/Type) Jeanne M.	DiGiongi	0 \ 0	_			Date	March 15	5, 2006

Express Mail Label No. EV682331440US	Dated: March 15, 2006